Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 1 of 62

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Gayle First name M. Middle name Anderson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Gayle M. Hite FKA Gayle M. Hall	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9345	

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 2 of 62 Case number (if known)

Debtor 1 Gayle M. Anderson

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
		EINs	EINs
5.	Where you live	2900 Maple Av. #5C Downers Grove, IL 60515	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		DuPage County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 3 of 62

Case number (if known)

Debtor 1 Gayle M. Anderson

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

		e 18-05033	Doc 1	Filed 02/23/18 Document	Entered 02/23/18 14:41:16 Page 4 of 62	Desc Main
Jeb	otor 1 Gayle M. Aı	nderson			Case number (if known)	
ar	t 3: Report About	Any Businesses	You Own a	s a Sole Proprietor		
12.	Are you a sole pro of any full- or part- business?		Go to Pa	art 4.		
		☐ Yes.	Name a	nd location of business		
	A sole proprietorship business you operat an individual, and is separate legal entity as a corporation, partnership, or LLC.	te as not a v such		business, if any		
	If you have more that sole proprietorship, separate sheet and	use a	Number	, Street, City, State & ZIP	Code	
	it to this petition.	attaori	Check ti	ne appropriate box to des	cribe your business:	
				Health Care Business (as	defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate	(as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in	n 11 U.S.C. § 101(53A))	
				Commodity Broker (as de	fined in 11 U.S.C. § 101(6))	
				None of the above		

13. Are you filing under Chapter 11 of the **Bankruptcy Code and are** you a small business debtor?

> For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

I am not filing under Chapter 11. ■ No.

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No.

☐ Yes.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 5 of 62

Debtor 1 Gayle M. Anderson

e M. Anderson Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 62 Case number (if known) Debtor 1 Gayle M. Anderson Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 2

/s/ Gayle M. Anderson

Gayle M. Anderson Signature of Debtor 1

Debtor 1 Gayle M. Anderson Page 7 of 62 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kent A. Gaertner	Date	February 23, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Kent A. Gaertner 3121489		
Printed name		
Kent A. Gaertner P.C.		
Firm name		
300 S. County Farm Rd.		
Suite I		
Wheaton, IL 60187		
Number, Street, City, State & ZIP Code		
Contact phone (630) 510-0000	Email address	kgaertner@springerbrown.com
3121489 IL		
Rar number & State		

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 8 of 62

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing
		-

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

every question.	as separate sheet to this form. On the top of any additional	, pages, with your name and ease number (it the my, rates of				
Part 7: Sign Below						
For you	I have examined this petition, and I declare under penalty	of perjury that the information provided is true and correct.				
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
	If no attorney represents me and I did not pay or agree to document, I have obtained and read the notice required by	· ·				
	I request relief in accordance with the chapter of title 11, U	Inited States Code, specified in this petition.				
	I understand making a false statement, concealing proper bankruptcy case can result in fines up to \$250,000, or impand 3579	ty, or obtaining money or property by fraud in connection with a risonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
	Gayle M. Anderson Signature of Debtor 1	Signature of Debtor 2				
	Executed on February 21, 2018 MM / DD / YYYY	Executed on MM / DD / YYYY				

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Page 9 of 62 Case number (if known) Document Debtor 1 Gayle M. Anderson I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed For your attorney, if you are represented by one under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. If you are not represented by an attorney, you do not need to file this page. Date February 21, 2018 MM / DD / YYYY Signature of Attorney for Debtor Kent A. Gaertner 3121489 Kent A. Gaertner P.C. Firm name 300 S. County Farm Rd. Suite I Wheaton, IL 60187 Number, Street, City, State & ZIP Code kgaertner@springerbrown.com Contact phone (630) 510-0000 Email address

> 3121489 IL. Bar number & State

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 10 of 62

Fill in this information to id	entify your case:						
First Name	1. Anderson Midd	dle Name	Last	Name			
Debtor 2 (Spouse if, filing) First Name	Mid	dle Name	Last	Name			
United States Bankruptcy Co	urt for the: NORTH	ERN DISTRICT C	OF ILLINOIS	3			
Case number (if known)							Check if this is an amended filing
Official Form 106De	******	المعالمة	Dobto	wla Sab	adulaa		
Declaration A	bout an inc	aividuai	Denic	or s acm	edules		12/15
You must file this form whe obtaining money or property years, or both. 18 U.S.C. §§	y by fraud in connect	tion with a bankr	or amende ruptcy case	d schedules. Ma e can result in fi	aking a false sta nes up to \$250,0	tement, co 100, or imp	ncealing property, or risonment for up to 20
Did you pay or agree	to pay someone who	is NOT an attorn	ey to help	you fill out banl	kruptcy forms?		
■ No							
Yes. Name of per	son			contain have been selected as the selected of the selected as			etition Preparer's Notice, nature (Official Form 119)
Under penalty of perju	correct.			chedules filed w	ith this declarat	ion and	
X Gayle M. Anders		eler Sm	x	Signature of De	btor 2		
Date <u>February</u>	21, 2018			Date			

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 11 of 62

Debtor 1	Gayle M. Anderse	On			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number (if known)				☐ Check if this is an amended filing	
O((; ;) E	rm 107				
Statemen	t of Financial A		viduals Filing for Bank		4/16
Statemen Be as complete information. If in the number (if known)	and accurate as possil more space is needed, vn). Answer every ques	ble. If two married peoplattach a separate sheet	le are filing together, both are equall		
Be as complete information. If number (if know Part 12: Sign I have read the are true and cowith a bankrupt	and accurate as possil more space is needed, yn). Answer every ques Below answers on this Statem rect. I understand that cy case can result in fir 2, 1341, 1519, and 3571.	ble. If two married people attach a separate sheet stion. nent of Financial Affairs making a false statemenes up to \$250,000, or in	le are filing together, both are equall to this form. On the top of any addit	y responsible for supplying correct ional pages, write your name and case under penalty of perjury that the answer money or property by fraud in connect	ers
Statemen Be as complete information. If in number (if known part 12: Sign I have read the are true and conwith a bankrupt	and accurate as possil more space is needed, vn). Answer every ques Below answers on this Statem rect. I understand that cy case can result in file 2, 1341, 1519, and 3571.	ble. If two married people attach a separate sheet stion. ment of Financial Affairs making a false statemenes up to \$250,000, or ir	le are filing together, both are equall to this form. On the top of any addit and any attachments, and I declare nt, concealing property, or obtaining	y responsible for supplying correct ional pages, write your name and case under penalty of perjury that the answer money or property by fraud in connect	ers
Be as complete information. If in number (if know Part 12: Sign I have read the are true and cowith a bankrupt 18 U.S.C. §§ 15: Gayle M. And Signature of Designature of De	and accurate as possil more space is needed, vn). Answer every ques Below answers on this Statem rect. I understand that cy case can result in file 2, 1341, 1519, and 3571.	ble. If two married people attach a separate sheet stion. ment of Financial Affairs making a false statemenes up to \$250,000, or ir	le are filing together, both are equall to this form. On the top of any addit and any attachments, and I declare nt, concealing property, or obtaining apprisonment for up to 20 years, or but to 20 years, or but to 20 years.	y responsible for supplying correct ional pages, write your name and case under penalty of perjury that the answer money or property by fraud in connect	ers

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

No.

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 12 of 62

Fill in this inform	ation to identify your	case:			
Debtor 1	Gayle M. Anderso	on			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
Official For Statemen	7.7.	n for Individu	ıals Filing Under	Chapter 7 12/18	5
	ubject to an unexpired		XSignature of Debtor 2	estate that secures a debt and any persona	I

Date

Date

February 21, 2018

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 13 of 62

Fill in this information to identify your case:	Check one box only as directed in this form and in Form
Debtor 1 Gayle M. Anderson	122A-1Supp:
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Northern District of Illinois Case number	 2. The calculation to determine if a presumption of abus applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

art 3: Sign Below
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.
x Mayle M. Conderson
Gayle M. Anderson
Signature of Debtor 1
Date February 21, 2018
MM / DD / YYYY
If you checked line 14a, do NOT fill out or file Form 122A-2.
If you checked line 14b, fill out Form 122A-2 and file it with this form.

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 14 of 62

Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Gayle M. Anderson	lines 40 or 42: According to the calculations required by this
Debtor 2 (Spouse, if filing)	Statement:
United States Bankruptcy Court for the: Northern District of Illinois	1. There is no presumption of abuse.
Case number(if known)	☐ 2. There is a presumption of abuse.
	☐ Check if this is an amended filing

Official Form 122A - 2 Chapter 7 Means Test Calculation

04/16

Part 5:	Sign Below
В	y signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.
x	Gayle M. Anderson Signature of Debtor 1
Date	February 21, 2018 MM / DD / YYYY

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 15 of 62

United States Bankruptcy Court Northern District of Illinois

In re	Gayle M. Anderson	Debtor(s)	Case No. Chapter 7	
	VER	IFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	9
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credit	ors is true and correct to	he best of my
Date:	February 21, 2018	Gayle M. Anderson Signature of Debtor	Brown	

	Docume	ent Page 16 of 62		
mation to identify your	case:			
Gayle M. Anderso	on			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				☐ Check if this is an amended filing
	Gayle M. Anderso	Gayle M. Anderson First Name Middle Name First Name Middle Name	Gayle M. Anderson First Name Middle Name Last Name First Name Middle Name Last Name	Gayle M. Anderson First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	203,079.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	203,079.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	56,174.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	49,291.00
	Your total liabilities	\$	105,465.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,414.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,381.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Filed 02/23/18 Desc Main Case 18-05033 Doc 1 Entered 02/23/18 14:41:16 Document

Page 17 of 62 Case number (if known) Debtor 1 Gayle M. Anderson

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9,366.50 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		543C 10 00000 1	Document Document	Page 18 of 62		30 IVIAIII
Fill i	n this inf	ormation to identify your	case and this filing:			
Debt	or 1	Gayle M. Anderso	on			
Dobt	0	First Name	Middle Name	Last Name		
Debt						
(Spous	se, if filing)	First Name	Middle Name	Last Name		
Unite	d States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLII	NOIS		
Coop	numbar					
Case	number			_		Check if this is an amended filing
						amended ming
Offi	cial F	orm 106A/B				
Sc	hedu	ıle A/B: Prop	ertv			12/15
			e items. List an asset only once. If a	n asset fits in more than o	ne category. list the asset in	
think i	t fits best.	Be as complete and accura	te as possible. If two married people	e are filing together, both a	re equally responsible for su	pplying correct
	er every qu		a separate sheet to this form. On th	e top of any additional pag	es, write your name and case	e number (if known).
Dout (Deceri	ha Each Basidanas Buildina	Land or Other Beel Fetete Very Ov	m ar Uava an Interset In		
Part	Descri	be Each Residence, Building	g, Land, or Other Real Estate You Ov	n or have an interest in		
1. Do	you own o	or have any legal or equitable	e interest in any residence, building	land, or similar property?		
_		D 10				
_	No. Go to I					
Ш	Yes. Whe	re is the property?				
Part 2	2 Descri	be Your Vehicles				
			uitable interest in any vehicles, v le, also report it on Schedule G: E.			ehicles you own that
Some	one eise i	ulives. Il you lease a verilci	e, also report it on <i>Scriedule G. E.</i>	xeculory Contracts and O	rriexpireu Leases.	
3. Ca	rs, vans,	trucks, tractors, sport ut	ility vehicles, motorcycles			
	No					
•	Yes					
		Ford		. •	Do not deduct secured cla	aims or exemptions. Put
3.1	Make:		Who has an interest in th	e property? Check one	the amount of any secure	d claims on Schedule D:
	Model:	Focus HB	Debtor 1 only		Creditors Who Have Clair	ms Secured by Property.
	Year:	2016 nate mileage: 30	Debtor 2 only	b.	Current value of the entire property?	Current value of the portion you own?
		formation:	Debtor 1 and Debtor 2 o	•	entire property:	portion you own:
		on: 2900 Maple Av. #5		ors and another		
		ers Grove IL 60515	☐ Check if this is comm	unity property	\$12,000.00	\$12,000.00
			(see instructions)			
4. W a	atercraft,	aircraft, motor homes, A	TVs and other recreational vehi	cles, other vehicles, and	d accessories	
Exa	amples: B	oats, trailers, motors, perso	onal watercraft, fishing vessels, sr	owmobiles, motorcycle a	ccessories	
	No					
•	Yes					
4.1	Make:	Jayco	Who has an interest in th	e property? Check one	Do not deduct secured cla	aima ar avamptiona. But
					the amount of any secure	d claims on Schedule D:
	Model:	330 RLTS	Debtor 1 only		Creditors Who Have Clair	ms Secured by Property.
	Year:	2011	Debtor 2 only		Current value of the	Current value of the
	Other in	formation:	Debtor 1 and Debtor 2	•	entire property?	portion you own?
		on- Campsite at 7957 I	☐ At least one of the debt Log ☐ Check if this is comm		\$27,000.00	\$27,000.00
	Locali	on oumpone at 1991 i		unity property	Ψ=1,000.00	Ψ=1,000.00

Official Form 106A/B Schedule A/B: Property page 1

(see instructions)

Cabin Rd. Putnam, II.

	Case 16-	05033 D0C.		Entereu 02/23/.	18 14.41.10	Desc Main
Debt	or 1 Gayle M. An	derson	Document	Page 19 of 62 _{Cas}	e number (if known)	
4.2	Make: Ezgo		Who has an interest in the	property? Check one	Do not deduct secur	ed claims or exemptions. Put
	Model: Golfcart		■ Debtor 1 only			ecured claims on Schedule D: Claims Secured by Property.
	Year: 2010		Debtor 2 only			
			Debtor 1 and Debtor 2 or	ıly	Current value of the entire property?	portion you own?
	Other information:		☐ At least one of the debtor			
	Location: Camp Cabin Rd. Putna		Check if this is communicated (see instructions)	nity property	\$1,500.00	\$1,500.00
	1	,				
			n for all of your entries fro that number here			\$40,500.00
Part 3	B: Describe Your Person	onal and Household It	ems			
	ou own or have any l		terest in any of the followi	ng items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> :	xamples: Major appliar No Yes. Describe		s, china, kitchenware			
		Location: 2900	Maple Av. #5C, Downer	rs Grove II 60515		
			ining room set, two cou		os, end	\$1,000.00
	including cel No Yes. Describe		media players, games Maple Av. #5C, Downer	rs Grove IL 60515		
		5 year old lapto				\$200.00
E)		d figurines; paintings, ions, memorabilia, co	prints, or other artwork; bool llectibles	ks, pictures, or other art c	bjects; stamp, coin, o	r baseball card collections;
	uipment for sports a xamples: Sports, photo musical instr	ographic, exercise, ar	nd other hobby equipment; b	icycles, pool tables, golf o	clubs, skis; canoes an	d kayaks; carpentry tools;
	No Yes. Describe					
	irearms Examples: Pistols, rifle No	s, shotguns, ammuni	tion, and related equipment			
	Yes. Describe					
	clothes Examples: Everyday cl No Yes. Describe	lothes, furs, leather c	oats, designer wear, shoes,	accessories		
		Location: 2900	Maple Av. #5C, Downer	rs Grove II 60515		
		Wearing appare		S SIONS IL UUSIS		\$1,000.00

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Gayle M. Andersor	Doc	ument	Page 20 of 62	Case number (if known)	
2. Jewelr	-	•				
		ostume jewelry, engagem	ent rings, we	dding rings, heirloom je	ewelry, watches, gems, go	old, silver
☐ No						
Yes.	Describe					
	Loca	tion: 2900 Maple Av.	#5C Dowr	ore Grove II 6051	5	
		ding band, costume fo		iers Grove IL 00313		\$1,000.00
					-
Non-fa	rm animals					
	ples: Dogs, cats, birds, he	orses				
■ No						
☐ Yes.	Describe					
. Any ot	her personal and hous	ehold items you did not	already list,	including any health	aids you did not list	
■ No	•	·		• ,	·	
☐ Yes.	Give specific information	n				
					Γ	
5. Add t	the dollar value of all of	your entries from Part	3, including	any entries for pages	you have attached	40.000.00
		r here				\$3,200.00
					L	
art 4: De	scribe Your Financial Ass	ets				
o you ov	vn or have any legal or	equitable interest in any	of the follow	wing?		Current value of the
						portion you own? Do not deduct secured
						claims or exemptions.
. Cash						
	ples: Money you have in	your wallet, in your home,	in a safe dep	oosit box, and on hand	when you file your petition	n
□ No						
Yes						
					Cash	
					Location:	
					2900 Maple	
					Av. #5C, Downers	
					Grove IL	
					60515	\$50.00
. Depos	its of money					
	ples: Checking, savings,	or other financial accounts			credit unions, brokerage h	ouses, and other similar
□ No	institutions. If you h	ave multiple accounts with	the same in	stitution, list each.		
			Institution	name:		
— 165						
	17.1	Checking account ending in #9824	BMO Ha	rrie		\$65.00
	17.1	. ending in #3024	DIVIO I Id	1113		Ψ03.00
	, mutual funds, or publ	icly traded stocks nent accounts with brokers	aga firme ma	anov market accounts		
	oles. Boliu lulius, ilivestii	ieni accounts with broken	age IIIIIIs, IIIC	mey market accounts		
		Institution or issuer nam	e:			
		Fidelity Investments	account e	nding in 2583- con	ntains Walgreen's	taca no
		stock				\$262.00
		d interests in incorporate	ed and uning	corporated businesse	es, including an interest	in an LLC, partnership, and
	venture					
■ No	Cive enceific information	a about them				
⊔ Yes. fficial Forr	•	n about themS	chedule A/B:	Property		page 3
	2 			- F y		rago

	Case 18-05033 Doc 1	Document	Page 21 of 62	Desc Main
Debtor 1	Gayle M. Anderson	Doddinent	Case number (if known)	
	Name of entity:		% of ownership:	
Negot Non-n ■ No	nment and corporate bonds and other tiable instruments include personal check negotiable instruments are those you can divide the specific information about them lessuer name:	s, cashiers' checks, pror	missory notes, and money orders.	
	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 40	1(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing p	lans
Yes.	List each account separately. Type of account:	Institution n	ame:	
	401(k)	Fidelity In	vestments	\$499.00
	403(b)	Fidelity In	nvestments	\$7,475.00
	IRA	Pershing	LLC IRA account ending in 8335	\$151,027.00
Your s Exam _i ■ No	ity deposits and prepayments share of all unused deposits you have maples: Agreements with landlords, prepaid	rent, public utilities (elec	tinue service or use from a company ctric, gas, water), telecommunications companidame or individual:	es, or others
	ties (A contract for a periodic payment of			
■ No	lssuer name and descript		• ,	
			ogram, or under a qualified state tuition prog	ıram.
	.C. §§ 530(b)(1), 529A(b), and 529(b)(1).		g,	,
	Institution name and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
■ No	s, equitable or future interests in prope Give specific information about them	rty (other than anythin	g listed in line 1), and rights or powers exer	cisable for your benefit
	ts, copyrights, trademarks, trade secre			
	Give specific information about them			
	ses, franchises, and other general intal ples: Building permits, exclusive licenses. Give specific information about them	•	n holdings, liquor licenses, professional license	s

Official Form 106A/B Schedule A/B: Property page 4

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debtor 1	Gayle M. Anderson	Document F	Page 22 of 62 Case	e number (if known)	
28. Tax r	efunds owed to you				
□ No	O'come and the late are all and the	and the last of the second second	de Clark than a team and the		
■ Yes	s. Give specific information about th	em, including whether you alread	dy filed the returns and tr	ne tax years	
		Possible tax refund for 20	47 Poturn not		
		filed	17. Return not	Federal and State	Unknown
			·		
	ly support	w analysis support shild support	t maintananaa diyaraa	antioment property act	tlamont
Exan	mples: Past due or lump sum alimor	iy, spousai support, chiid support	i, maintenance, divorce s	settlement, property set	.iement
☐ Yes	s. Give specific information				
	r amounts someone owes you nples: Unpaid wages, disability insu	rance payments, disability benefi	its, sick pay, vacation pa	y, workers' compensat	ion, Social Security
■ No	benefits; unpaid loans you m	ade to someone else			
	s. Give specific information				
	ests in insurance policies				
_Exar	mples: Health, disability, or life insur	ance; health savings account (HS	SA); credit, homeowner's	s, or renter's insurance	
□ No	s. Name the insurance company of	each policy and list its value			
_ 100	Company r		Beneficiary:		Surrender or refund value:
				_	
	State Far	m Life	Colleen Llo	oyd	\$1.00
If you some	nterest in property that is due you are the beneficiary of a living trust eone has died. S. Give specific information			ently entitled to receive	property because
oo Claim	ns against third parties, whether o	or not you have filed a lawsuit	or made a demand for	navmont	
Exar	mples: Accidents, employment dispu			payment	
■ No	. Dagariha asah alaim				
	s. Describe each claim				
34. Othe i ■ No	r contingent and unliquidated cla	ims of every nature, including	counterclaims of the d	ebtor and rights to set	off claims
	s. Describe each claim				
35. Any f	inancial assets you did not alread	dy list			
■ No					
☐ Yes	s. Give specific information				
	I the dollar value of all of your en Part 4. Write that number here			have attached	\$159,379.00
Part 5: D	Describe Any Business-Related Prope	rty You Own or Have an Interest In.	List any real estate in Par	t 1.	
37. Do yo ı	u own or have any legal or equitable in	nterest in any business-related pro	perty?		
_	Go to Part 6.				
Yes.	Go to line 38.				

Official Form 106A/B Schedule A/B: Property page 5

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Page 23 of 62
Case number (if known) Document Debtor 1 Gayle M. Anderson Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$40.500.00 57. Part 3: Total personal and household items, line 15 \$3,200.00 Part 4: Total financial assets, line 36 58. \$159,379.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61.

\$203,079.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$203,079.00

\$203,079.00

Fill in this information to identify your case:						
Debtor 1	Gayle M. Anderso	on				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Location: 2900 Maple Av. #5C, Downers Grove II, 60515	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
Bedroom set, dining room set, two couches, desk, TV, lamps, end tables, dresser. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Location: 2900 Maple Av. #5C,	\$1,000.00		100%	735 ILCS 5/12-1001(a)	
Wearing apparel for Debtor Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
Location: 2900 Maple Av. #5C,	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
Wedding band, costume fewelry Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		
Cash Location: 2900 Maple Av. #5C,	\$50.00		\$50.00	735 ILCS 5/12-1001(b)	
Downers Grove IL 60515 Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit		
Checking account ending in #9824: BMO Harris	\$65.00		\$65.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 25 of 62

Case M. Anderson Case number (if known)

	'-				'-	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Fidelity Investments account ending in 2583- contains Walgreen's stock	\$262.00	\$262.00		735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit		
	401(k): Fidelity Investments Line from Schedule A/B: 21.1	\$499.00		100%	735 ILCS 5/12-1006	
	Line Ironi Schedule A.B. Z			100% of fair market value, up to any applicable statutory limit		
	403(b): Fidelity Investments Line from Schedule A/B: 21.2	\$7,475.00		100%	735 ILCS 5/12-1006	
	Line Ironi Schedule Alb. 21.2			100% of fair market value, up to any applicable statutory limit		
	IRA: Pershing LLC IRA account ending in 8335	\$151,027.00		100%	735 ILCS 5/12-1006	
	Line from Schedule A/B: 21.3			100% of fair market value, up to any applicable statutory limit		
	Federal and State: Possible tax refund for 2017. Return not filed	Unknown		\$1,623.00	735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered.	3 years after that for ca	ises fi	ŕ	,	
	□ No					

Yes

	Document Pa	age 26 of 62	2		
Fill in this information to identify yo	ur case:				
Debtor 1 Gayle M. Ander	rson				
First Name		st Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name Las	st Name			
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLINO	IS			
				-	
Case number (if known)				□ Chook	if this is an
(ii Kilowii)				_	if this is an led filing
				amono	ica illing
Official Form 106D					
	s Who Have Claims Se	cured by	Dronart	V	12/15
Scriedale D. Creditors	s who have claims be	cured by	rioperi	<u>y </u>	12/13
	If two married people are filing together, b				
number (if known).	out, number the entries, and attach it to the	is form. On the top	or any additio	nai pages, write your na	me and case
1. Do any creditors have claims secured b	by your property?				
☐ No. Check this box and submit	this form to the court with your other sch	edules. You have	nothing else t	to report on this form.	
■ Yes. Fill in all of the information	·	344.001 1041.410			
	below.				
Part 1: List All Secured Claims		Colu	unam A	Calumn B	Calumn C
	more than one secured claim, list the creditor	separately	mn A	Column B	Column C
much as possible, list the claims in alphabet	is a particular claim, list the other creditors in P tical order according to the creditor's name.		ount of claim ot deduct the	Value of collateral that supports this	Unsecured portion
	Ğ		e of collateral.	claim	If any
2.1 Fifth Third Bank Creditor's Name	Describe the property that secures the c		20,078.00	\$12,000.00	\$8,078.00
Creditor's Name	2016 Ford Focus HB 30000 mile Location: 2900 Maple Av. #5C,	:S			
D.O. D	Downers Grove IL 60515				
P.O. Box 630778	As of the date you file, the claim is: Check	k all that			
Cincinnati, OH 45263-0778	apply.				
Number, Street, City, State & Zip Code	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as morte	age or secured			
Debtor 2 only	car loan)	,3			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechani	ic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a	•	to Loan			
community debt					
Date debt was incurred 2017	Last 4 digits of account number	2141			
ZOT7		2141			
2.2 North Shore Bank	Describe the property that secures the c	laim: (36,096.00	\$27,000.00	\$9,096.00
Creditor's Name	2011 Jayco 330 RLTS	141111.	930,030.00	φ21,000.00	<u> </u>
	Location- Campsite at 7957 Log				
	Cabin Rd. Putnam, II.	'			
15700 Blue Mound Rd.	As of the date you file, the claim is: Check	k all that			
Brookfield, WI 53005	apply. □ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as morto	gage or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechani	ic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a	Other (including a right to offset)	to Loan			
community debt					
Date debt was incurred	Last 4 digits of account number	5445			

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 27 of 62

Debtor 1	Gayle M. Anderson			Case number (if know)	
	First Name	Middle Name	Last Name	_	
Add the	dollar value of you	r entries in Column A on t	this page. Write that number here:	\$56,174.00]

\$56,174.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 2	8 of 62		
Fill in this infor	mation to identify your	case:				
Debtor 1	Gayle M. Anderso	on				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS			
0						
Case number [П	Check if this is an
,					_	amended filing
						ŭ
Official Fori						
Schedule F	E/F: Creditors W	/ho Have Unsecured	d Claims			12/15
chedule G: Exect chedule D: Credi eft. Attach the Co ame and case nu	utory Contracts and Unexp itors Who Have Claims Sec ontinuation Page to this pag	that could result in a claim. Also bired Leases (Official Form 106G). Eured by Property. If more space is ge. If you have no information to respective of Claims.	Do not include s needed, copy	any creditors with partially se the Part you need, fill it out, n	ecured claim number the e	s that are listed in ntries in the boxes on the
	tors have priority unsecure					
No. Go to	• •	d claims against you:				
Yes	Pail 2.					
	All of Your NONPRIORIT	TV Uncoured Claims				
	tors have nonpriority unse	cured claims against you?				
3. Do any credit No. You ha Yes. 4. List all of you unsecured clathan one credit	ave nothing to report in this p ur nonpriority unsecured cl nim, list the creditor separatel	cured claims against you? part. Submit this form to the court wit laims in the alphabetical order of to y for each claim. For each claim liste list the other creditors in Part 3.lf you	the creditor who	o holds each claim. If a credito type of claim it is. Do not list clai	ims already ir	ncluded in Part 1. If more
3. Do any credit No. You ha Yes. 4. List all of you unsecured cla	ave nothing to report in this p ur nonpriority unsecured cl nim, list the creditor separatel	part. Submit this form to the court wit laims in the alphabetical order of the y for each claim. For each claim listers	the creditor who	o holds each claim. If a credito type of claim it is. Do not list clai	ims already ir	ncluded in Part 1. If more e Continuation Page of
3. Do any credit No. You ha Yes. 4. List all of you unsecured cla than one credit Part 2.	ave nothing to report in this pur nonpriority unsecured clim, list the creditor separatel itor holds a particular claim, l	laims in the alphabetical order of the y for each claim. For each claim liste the other creditors in Part 3.lf you	the creditor who ed, identify what u have more thar	o holds each claim. If a credito type of claim it is. Do not list clai three nonpriority unsecured cla	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You ha Yes. 4. List all of you unsecured cla than one credit Part 2.	ave nothing to report in this pur nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list	part. Submit this form to the court wit laims in the alphabetical order of the y for each claim. For each claim listers	the creditor who ed, identify what u have more thar	o holds each claim. If a credito type of claim it is. Do not list clai	ims already ir	ncluded in Part 1. If more e Continuation Page of
3. Do any credit No. You hat Yes. 4. List all of you unsecured clathan one cred Part 2. Carsor Nonpriori	ave nothing to report in this pur nonpriority unsecured clim, list the creditor separatel itor holds a particular claim, l	laims in the alphabetical order of the y for each claim. For each claim liste the other creditors in Part 3.lf you	the creditor who ed, identify what u have more than ccount number	o holds each claim. If a credito type of claim it is. Do not list clai three nonpriority unsecured cla	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You hat Yes. 4. List all of you unsecured cla than one cred Part 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number 8	ave nothing to report in this part nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list the Creditor's Name I. Loop 1604 East	laims in the alphabetical order of the y for each claim. For each claim lister list the other creditors in Part 3.lf you Last 4 digits of act when was the delegated as of the date you	the creditor who ed, identify what u have more than ccount number bt incurred?	o holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured cla	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You hat Yes. 4. List all of you unsecured clathan one credit Part 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number 3 Who income	ur nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list Creditor's Name 1. Loop 1604 East lot lot lot lot lot lot lot lot lot lo	laims in the alphabetical order of the y for each claim. For each claim liste list the other creditors in Part 3.lf you Last 4 digits of act when was the delegation. As of the date you	the creditor who ed, identify what u have more than ccount number bt incurred?	o holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured classes and the control of	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You hat Yes. 4. List all of you unsecured cla than one credit Part 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number 3 Who incredit	ur nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list Creditor's Name 1. Loop 1604 East 101 10101, TX 78247-5006 1. Street City State Zlp Code urred the debt? Check one.	laims in the alphabetical order of the y for each claim. For each claim lister list the other creditors in Part 3.lf you Last 4 digits of act when was the delegated as of the date you. Contingent	the creditor who ed, identify what u have more than ccount number bt incurred?	o holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured classes and the control of	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You hat Yes. 4. List all of you unsecured cla than one cred Part 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number 8 Who ince	ave nothing to report in this part nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list Creditor's Name 1. Loop 1604 East 101 101 101 101 101 101 101 101 101 10	laims in the alphabetical order of the y for each claim. For each claim lister list the other creditors in Part 3.lf you Last 4 digits of act When was the del As of the date you Contingent Unliquidated	the creditor who ed, identify what u have more than ccount number bt incurred?	o holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured classes and the control of	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You hat Yes. 4. List all of you unsecured clathan one credit Part 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number S Who incu	ur nonpriority unsecured claim, list the creditor separatel iter holds a particular claim, list Creditor's Name L Loop 1604 East 01 ntonio, TX 78247-500e Street City State Zlp Code urred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only	laims in the alphabetical order of the y for each claim. For each claim liste list the other creditors in Part 3.lf you Last 4 digits of act when was the del As of the date you Contingent Unliquidated Disputed	the creditor who ed, identify what a have more than ecount number bt incurred?	b holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured class three nonpriority unsecured class to date 2013 to date is: Check all that apply	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You hat Yes. 4. List all of you unsecured clathan one credipart 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number 8 Who incu	ur nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list Creditor's Name I. Loop 1604 East lo1 ntonio, TX 78247-500 Street City State Zlp Code urred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and an	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO	the creditor who ed, identify what a have more than ecount number bt incurred?	b holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured class three nonpriority unsecured class to date 2013 to date is: Check all that apply	ims already ir	ncluded in Part 1. If more e Continuation Page of Total claim
3. Do any credit No. You hat Yes. 4. List all of you unsecured clathan one credipart 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number 8 Who incu	ur nonpriority unsecured claim, list the creditor separatel iter holds a particular claim, list Creditor's Name L Loop 1604 East 01 ntonio, TX 78247-500e Street City State Zlp Code urred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO munity Student loans	the creditor who ed, identify what u have more than ecount number bt incurred? u file, the claim	b holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured claim. 6191 2013 to date is: Check all that apply d claim:	ims already ir	roluded in Part 1. If more e Continuation Page of Total claim \$422.00
3. Do any credit No. You hat Yes. 4. List all of you unsecured clathan one credipart 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number S Who incu	ur nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list Creditor's Name I. Loop 1604 East lo1 ntonio, TX 78247-500 Street City State Zlp Code urred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and an	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO Student loans Obligations aris report as priority cle	the creditor who ed, identify what a have more than account number bt incurred? Unified the claim or a separation out of a separation of the count of a separation of the count of the cou	b holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured claim. 6191 2013 to date is: Check all that apply d claim:	ims already ir aims fill out th	roluded in Part 1. If more e Continuation Page of Total claim \$422.00
3. Do any credit No. You hat Yes. 4. List all of you unsecured clathan one credipart 2. 4.1 Carsor Nonpriori 6550 N Suite 1 San Ar Number S Who incu	ur nonpriority unsecured claim, list the creditor separatel itor holds a particular claim, list Creditor's Name I. Loop 1604 East 101 ntonio, TX 78247-5004 Street City State Zlp Code urred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and an k if this claim is for a comi	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO Student loans Obligations aris report as priority cle	the creditor who ed, identify what a have more than account number bt incurred? Unified the claim or a separation out of a separation of the count of a separation of the count of the cou	b holds each claim. If a credito type of claim it is. Do not list clain three nonpriority unsecured claim. 6191 2013 to date is: Check all that apply d claim:	ims already ir aims fill out th	roluded in Part 1. If more e Continuation Page of Total claim \$422.00

Page 29 of 62 Case number (if know) Debtor 1 Gayle M. Anderson 4.2 \$13,679.00 Chase Last 4 digits of account number 0518 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? 2013 to 2017 Wilmington, DE 19850-5298 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.3 **Discover** Last 4 digits of account number 7862 \$19,675.00 Nonpriority Creditor's Name P.O. Box 15316 When was the debt incurred? 2013 to 2017 Wilmington, DE 19850-5316 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Credit card purchases ☐ Yes Other, Specify 4.4 Discover Last 4 digits of account number 2845 \$13,175.00 Nonpriority Creditor's Name P.O. Box 30396 When was the debt incurred? 2013 to 2017 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Personal loan** Other. Specify

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 30 of 62
Case number (if know)

Debtor	1 Gayle M. Anderson	Case number (if know)	
4.5	Gwynie Bee	Last 4 digits of account number	\$544.00
	Nonpriority Creditor's Name 43-01 22nd St. 5th Floor	When was the debt incurred? 20126	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.6	J.C. Penny/GE Capital Retail Bank Nonpriority Creditor's Name	Last 4 digits of account number 9941	\$1,633.00
	P.O.Box 965009 Orlando, FL 32896-5009	When was the debt incurred? 2013 to date	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.7	Kohls	Last 4 digits of account number 3013	\$163.00
	Nonpriority Creditor's Name		V.00.00
	P.O. Box 2983 Milwaukee, WI 53201	When was the debt incurred? 2013 to date	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Case 18-05033 Page 31 of 62 Case number (if know) Document

Debtor 1 Gayle M. Anderson

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 49,291.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 49,291.00

		17(7,1111)		
Fill in this inform	mation to identify your	case:		
Debtor 1	Gayle M. Anderso	on		
ı	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

		Docume	ent Page 33 d	ot 62	
Fill in this	information to identify your	case:			
Debtor 1	Gayle M. Anders	on			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_					
Case num (if known)	ber				☐ Check if this is an
(ii kiiowii)					☐ Check if this is an amended filing
					3
Officia	l Form 106H				
Sched	lule H: Your Cod	lebtors			12/15
	and case number (if known you have any codebtors? (if	,		e as a codebtor.	
■ No					
☐ Yes	S				
	hin the last 8 years, have yo na, California, Idaho, Louisiana				states and territories include
7 (11201	ia, Gamornia, Idano, Eddiolani	i, recrada, recrimoxico, ra	cito ittoo, rexao, wasi	inigion, and wisconsin.)	
■ No.	. Go to line 3.				
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The cre	ditor to whom you owe the debt
	Name, Number, Street, City, State and 2	ZIP Code		Check all schedule	s that apply:
3.1				□ Schodulo D. line	
	Name			☐ Schedule D, line ☐ Schedule E/F, li	
				☐ Schedule G, line	
-					
	Number Street City	State	ZIP Code		
		Cialo			
				Пол	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, li ☐ Schedule G, line	
-					
	Number Street City	State	ZIP Code		
	···,	Julio	Z.: 0000		

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 34 of 62

						_					
	in this information to identify your of btor 1 Gayle M. Ar										
	btor 2 puse, if filing)				_						
	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS								
	se number		-			☐ A su	amende uppleme	d filing ent show	wing postpetition e following date:	chapter	
0	fficial Form 106I					\overline{MM}	I / DD/ Y	YYY	-		
S	chedule I: Your Inc	ome								12/15	
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The separate sheet to this form. The separate sheet to this form. The separate sheet to this form.	ır spouse is not filing w	ith you, do not inclu	de infor	mati	on about y	our spo	use. If	more space is	needed,	
•	information.		Debtor 1				Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed		■ Employed□ Not employed						
	employers. Include part-time, seasonal, or self-employed work.	Occupation Employer's name									
	Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed t	here?				_				
Pa	rt 2: Give Details About Mo	nthly Income									
	imate monthly income as of the dust unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$	0 in the	space.	Include your nor	n-filing	
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all	empl	oyers for the	at perso	n on th	e lines below. If y	you need	
						For Debto	or 1		Debtor 2 or -filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,99	96.00	\$	4,379.00		
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	0.00		
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	4,996	.00	\$	4,379.00		

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 35 of 62

Deb	tor 1	Gayle M. Anderson	-	С	ase ı	number (if known)				
	Con	ny line 4 hore	4			Debtor 1	no	r Debtor n-filing s	spouse	
	Cop	by line 4 here	4.	•	\$	4,996.00	\$_	4	,379.00	<u>)</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. :	\$	1,228.00	\$		758.00)
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.00	\$		95.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$	387.00	\$_		0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$	300.00	\$_		0.00	
	5e. 5f.	Insurance Demostic cupport obligations	5e. 5f.		\$ \$	0.00	\$_ \$		139.00	
	5g.	Domestic support obligations Union dues	5i. 5g.		φ \$	0.00	φ_ \$		0.00 54.00	
	5h.	Other deductions. Specify:	5h.		\$ 		+ \$ ⁻		0.00	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	9	_	1,915.00	\$	1	,046.00	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	_	3,081.00	\$ \$,333.00	_
		·	٠.	,	_	3,061.00	Ψ_		,333.00	<u>, </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. ;	\$	0.00	\$		0.00)
	8b.	Interest and dividends	8b.	. :	\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. ;	\$	0.00	\$		0.00)
	8d.	Unemployment compensation	8d.	. :	\$	0.00	\$		0.00	
	8e.	Social Security	8e.	. :	\$	0.00	\$		0.00)
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$_		0.00	
	8g.	Pension or retirement income	8g.		\$	0.00	\$_		0.00	_
	8h.	Other monthly income. Specify:	8h.	.+ :	\$	0.00	+ \$_		0.00	<u>)</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$_		0.0	00
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,081.00 + \$	3	,333.00	= \$	6,414.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		—		,,001.00 · \$ _		,555.00		0,414.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		,	,	•	Schedule	e <i>J</i> . +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						e. 12.	\$	6,414.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						Combi	ined ily income
	_	Voc Evolain:								

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 36 of 62

Fill	in this information to identify y	our case:					
Deb	otor 1 Gayle M. An	derson			Che	eck if this is:	
	otor 2 ouse, if filing)						wing postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Cas	se number						
(If k	nown)						
0	fficial Form 106J						
S	chedule J: Your	Exper	ises				12/15
info	as complete and accurate as ormation. If more space is ne mber (if known). Answer eve	eded, atta	ch another sheet to this	e filing together, b form. On the top of	oth are equ f any addit	ually responsible fo ional pages, write y	or supplying correct your name and case
	t 1: Describe Your House	ehold					
1.	Is this a joint case?						
	■ No. Go to line 2.□ Yes. Does Debtor 2 live	in a separ	ate household?				
	□No						
	☐ Yes. Debtor 2 mu	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Del	btor 2.	
2.	Do you have dependents?	■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						□ Yes □ No
							☐ Yes
							□ No
							☐ Yes
							□ No □ Yes
3.	Do your expenses include	. •	No				— 103
	expenses of people other to yourself and your depende		Yes				
Por	t 2: Estimate Your Ongo		ly Evnances				
Est	timate your expenses as of your enses as of a date after the olicable date.	our bankr	uptcy filing date unless y				
the	lude expenses paid for with value of such assistance ar ficial Form 106l.)					Your exp	enses
,	The newfol or beauty	alada a		aduala finat t			
4.	The rental or home owners payments and any rent for the			iciude first mortgagi	e 4.	\$	0.00
	If not included in line 4:						
	4a. Real estate taxes				4a.	·	0.00
	4b. Property, homeowner				4b.		0.00
	4c. Home maintenance, re4d. Homeowner's associa				4c. 4d.	·	0.00
5.	Additional mortgage paym			me equity loans	5.	·	0.00

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 37 of 62

Deb	otor 1	Gayle M.	. Anderson	Case nun	nber (if known)	-
6.	Utiliti	ies:				
٠.	6a.		, heat, natural gas	6a.	. \$	95.00
	6b.		wer, garbage collection	6b.		0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	. \$	100.00
	6d.	Other. Spe		6d.	·	0.00
7.			ekeeping supplies	7.	· -	450.00
8.			children's education costs	8.	·	0.00
9.			ry, and dry cleaning	9.	·	300.00
		· ·	products and services	10.		75.00
			ntal expenses	11.	·	250.00
			Include gas, maintenance, bus or train fare.		· •	
			ar payments.	12.	. \$	300.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	. \$	50.00
14.	Char	itable cont	ributions and religious donations	14.	. \$	100.00
15.	Insur	rance.				
			surance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insura	ance	15a.	*	153.00
	15b.	Health ins	urance	15b.	. \$	0.00
		Vehicle in:		15c.	. \$	45.00
	15d.	Other insu	rance. Specify: Camper Insurance	15d.	. \$	40.00
16.			clude taxes deducted from your pay or included in lines 4 or 20.			
	Spec	,		16.	. \$	0.00
17.			ease payments:		_	
			ents for Vehicle 1	17a.	· -	356.00
			ents for Vehicle 2	17b.	·	379.00
		Other. Spe	-	17c.	·	0.00
		Other. Spe		17d.	. \$	0.00
18.			of alimony, maintenance, and support that you did not repo		¢	0.00
10			your pay on line 5, Schedule I, Your Income (Official Form 10)6I). 18.	. \$	
19.			s you make to support others who do not live with you.	40	Ф	0.00
20	Spec	·	erty expenses not included in lines 4 or 5 of this form or on	19.		
20.			s on other property	20a.		0.00
		Real estat		20b.		0.00
			homeowner's, or renter's insurance	20c.	·	0.00
			nce, repair, and upkeep expenses	20d.		0.00
			er's association or condominium dues	20d. 20e.	·	
24			ers association or condominatin dues		· ·	0.00
۷١.	Otne	r: Specify:			. +\$	0.00
22.	Calc	ulate your	monthly expenses			
	22a.	Add lines 4	through 21.		\$	2,693.00
	22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	3,688.00
	22c. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	6,381.00
			• • •		<u> </u>	
23.		-	monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.	*	6,414.00
	23b.	Copy your	monthly expenses from line 22c above.	23b.	\$	6,381.00
	0.0	0.17				
	23c.		our monthly expenses from your monthly income.	23c.	. \$	33.00
		rne result	is your monthly net income.	230.	· L*	33.33
24.	For ex	xample, do yo	an increase or decrease in your expenses within the year aftou expect to finish paying for your car loan within the year or do you expec			ease or decrease because of a
			terms of your mortgage?			
	■ No	0.				
	Пу	00	Explain here:			

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 38 of 62

Deb	otor 1 Gayle M. Anderso	on	Case nu	mber (if known)	
Fill	in this information to identify	your case:			
Deb Deb	tor 1 Gayle M. A			ck if this is: An amended filing A supplement showing expenses as of the fol	g postpetition chapter 13 lowing date:
Unit	ed States Bankruptcy Court for the	he: NORTHERN DISTRICT OF ILLIN	IOIS	MM / DD / YYYY	
	e number nown)		_	Non-Filing Spouse	
	fficial Form 106J	<u>-2</u> ur Expenses for Sep	arate Househol	d of Debtor	2 12/15
Use Del fori spa	e this form for Debtor 2's so btor 2 have one or more de m only with respect to expe ace is needed, attach anoth swer every question.	eparate household expenses ONLY pendents in common, list the depenenses for Debtor 2 that are not reporter sheet to this form. On the top of a	IF Debtor 1 and Debtor 2 m dents on both Schedule J rted on Schedule J. Be as	aintain separate hou and this form. Answ complete and accurat	seholds. If Debtor 1 and er the questions on this e as possible. If more
1.		ntain separate households?			
2.	Do you have dependents	? ■ No			
	Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	☐ Yes. Fill out this information for each dependent	Dependent's relationship t Debtor 2	o Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No □ Yes
					□ No □ Yes
					□ No □ Yes
3.	Do your expenses includ	e ■ _{No}			□ No □ Yes
	expenses of people other yourself and your depend	r than			
		oing Monthly Expenses your bankruptcy filing date unless y	you are using this form as a	a supplement in a Ch	apter 13 case to report
	enses as of a date after the				
		h non-cash government assistance in ncluded it on <i>Schedule I: Your Incor</i>		Your expenses	
4.	The rental or home owne payments and any rent for	rship expenses for your residence. I the ground or lot.	Include first mortgage	ı. \$	575.00
	If not included in line 4:				
	4a. Real estate taxes4b. Property, homeowne	er's, or renter's insurance		a. \$ b. \$	0.00 35.00
		repair, and upkeep expenses		c. \$	100.00

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 39 of 62

Debtor 1 Gayle M. Anderson		Case numb	er (if known)	
4d. Homeowner's association or co	ndominium dues	4d.	\$	224.00
Additional mortgage payments for	your residence, such as home equity loans	5.	\$	0.00
Utilities:				
6a. Electricity, heat, natural gas		6a.	\$	95.00
6b. Water, sewer, garbage collection	n	6b.	·	0.00
6c. Telephone, cell phone, Internet.		6c.	·	215.00
6d. Other. Specify:	, satellite, and cable services	6d.	·	
Food and housekeeping supplies		6u. 7.	\$	0.00
	aaata		·	400.00
Childcare and children's education		8.	\$	0.00
Clothing, laundry, and dry cleaning		9.	·	150.00
Personal care products and service	es .	10.	·	50.00
Medical and dental expenses		11.	\$	150.00
. Transportation. Include gas, mainten	lance, bus or train fare.	12.	\$	300.00
Do not include car payments. Entertainment, clubs, recreation, not	owenanere manazines and hooke		\$	100.00
. Charitable contributions and religio		14.	·	30.00
Insurance.	us uonations	14.	Ψ	30.00
	om your pay or included in lines 4 or 20.			
15a. Life insurance	in your pay or included in lines 4 of 20.	15a.	\$	0.00
15b. Health insurance		15b.	·	0.00
15c. Vehicle insurance		15c.		162.00
15d. Other insurance. Specify:		15d.	·	0.00
	from your pay or included in lines 4 or 20.		Ψ	0.00
Specify:	Thom your pay or included in lines 4 or 20.	16.	\$	0.00
. Installment or lease payments:			·	0.00
17a. Car payments for Vehicle 1		17a.	\$	0.00
17b. Car payments for Vehicle 2		17b.	·	339.00
17c. Other. Specify: Champion	Windows	17c.	·	102.00
Student Loans	······································		\$	186.00
Non Filing Spouse credit of	parde		<u>\$</u>	445.00
Garage Parking	,ai us		<u>¢</u> ———	30.00
	ance, and support that you did not report as		Ψ	30.00
	Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other payments you make to suppo			\$	0.00
Specify:	,	19.	*	
	cluded in lines 4 or 5 of this form or on Sche		ur Income.	
20a. Mortgages on other property		20a.		0.00
20b. Real estate taxes		20b.	\$	0.00
20c. Property, homeowner's, or rente	er's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkee	ep expenses	20d.		0.00
20e. Homeowner's association or co	ndominium dues	20e.	\$	0.00
. Other: Specify:		21.	+\$	0.00
		— <u>-</u>		0.00
Your monthly expenses. Add lines 5 The result is the monthly expenses of calculate the total expenses for Debto	Debtor 2. Copy the result to line 22b of Schedu	ıle J to	\$	3,688.00
3. Line not used on this form.				
	ase in your expenses within the year after yo	ou file this	form?	
For example, do you expect to finish paying modification to the terms of your mortgage?	for your car loan within the year or do you expect you			se or decrease because of
■ No.				
☐ Yes. Explain here:				

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 40 of 62

Fill in this infor	mation to identify your	case:			
Debtor 1	Gayle M. Anderso	on			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
			I Debtor's Sci		12/15
obtaining money		n connection with a bar			nent, concealing property, or or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	eone who is NOT an atto	orney to help you fill out ba	inkruptcy forms?	
■ No					
☐ Yes. N	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
•	lty of perjury, I declare e true and correct.	that I have read the sur	nmary and schedules filed	with this declaration	and
X /s/ Gav	le M. Anderson		Х		
	M. Anderson		Signature of D	Debtor 2	

Date

Signature of Debtor 1

Date February 23, 2018

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 41 of 62

Eil	l in this inform	nation to identify you	r case.			
	btor 1					
De	DIOI I	Gayle M. Anders	Middle Name	Last Name		
1	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
'						
Un	ited States Bar	kruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
1	se number				_	Check if this is an amended filing
	fficial For atement		Affairs for Individ	duals Filing for E	Bankruptcy	4/10
info	ormation. If ments	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for su y additional pages, write yo	
1.	-	current marital statu		Elved Belole		
	_					
	MarriedNot married	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	٧.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
	945 Herr D New Lenox		From-To: 2016 and prio	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	es and territorie ■ No □ Yes. Ma	es include Árizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	nity property state or territo ico, Texas, Washington and	
Pa	rt 2 Explain	n the Sources or You	rincome			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		endar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,165.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Case 18-05033 Page 42 of 62
Case number (if known) Document

Debtor 1 Gayle M. Anderson

				Debtor 1				Debtor 2		
				Sources of inc		Gross income (before deductions exclusions)	s and	Sources of inc		Gross income (before deductions and exclusions)
		ndar year: December	31, 2017)	■ Wages, combonuses, tips	nmissions,	\$59,95	56.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a	business			☐ Operating a	business	
		ndar year be December		■ Wages, combonuses, tips	nmissions,	\$56,67	72.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a	business			☐ Operating a	business	
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint ca the gross inco	pensions; rental i se and you have i ome from each so	income; inter ncome that y		y colled , list it d	eted from lawsuits; only once under D hat you listed in lir	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
				Debtor 1				Debtor 2		
				Sources of inc Describe below		Gross income fro each source (before deductions exclusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before Yo	ou Filed for I	Bankruptcy				
5.	Are eithe ☐ No.	Neither Deindividual During the No. Yes	ebtor 1 nor I primarily for a 90 days before Go to line 7 List below paid that control include	a personal, family, ore you filed for ba 7. each creditor to we reditor. Do not inc payments to an a	narily consu or househol ankruptcy, did whom you paid lude paymen attorney for th	d you pay any creditod a total of \$6,425* outs for domestic supports bankruptcy case.	or a tota r more ort oblig	al of \$6,425* or mo in one or more pay gations, such as ch	re? yments and t nild support a	ınd alimony. Also, do
		* Subject	to adjustmen	it on 4/01/19 and	every 3 years	s after that for cases	filed on	or after the date of	of adjustment	
	Yes			or both have print ore you filed for ba		mer debts. d you pay any credito	or a tota	al of \$600 or more	?	
		□ No.	Go to line 7	7.						
		■ Yes	include pay		tic support of	d a total of \$600 or m bligations, such as ch				t creditor. Do not include payments to an
	Credito	r's Name an	d Address	Date	es of payme		ount oaid	Amount you still owe	Was this p	payment for
	Fifth TI See Sc	nird Bank h. D			nth;y @ 9/mo.	\$1,077		\$20,078.00	☐ Mortgae ☐ Car ☐ Credit (☐ Loan R ☐ Supplie	Card

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Page 43 of 62
Case number (if known) Document

Debtor 1 Gayle M. Anderson

North Shore Bank Monthly @ \$1,128.00 \$36,0 See Sch. D \$376/mo.	Was this payment for Mortgage Car Credit Card Loan Repayment Suppliers or vendors Other Camper
See Sch. D \$376/mo. Chase various \$629.00 \$13,6	☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors
· · · · · · · · · · · · · · · · · · ·	
	679.00 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed any Insiders include your relatives; any general partners; relatives of any general partners; partnerships of of which you are an officer, director, person in control, or owner of 20% or more of their voting securities a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support of alimony.	f which you are a general partner; corporations es; and any managing agent, including one fo
NoYes. List all payments to an insider.	
Insider's Name and Address Dates of payment Total amount Amou	unt you Reason for this payment till owe
, ,	erty on account of a debt that benefited an unt you Reason for this payment till owe Include creditor's name
	:iii owe include creditor's name
Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or a List all such matters, including personal injury cases, small claims actions, divorces, collection suits, p modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Nature of the case Court or agency	
 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclose Check all that apply and fill in the details below. 	ed, garnished, attached, seized, or levied?
■ No. Go to line 11. □ Yes. Fill in the information below.	
Creditor Name and Address Describe the Property	Date Value of the
Explain what happened	property

Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Case 18-05033

Page 44 of 62
Case number (if known) Document Debtor 1 Gayle M. Anderson

11.	Within 90 days before you filed for bankr accounts or refuse to make a payment b No Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any a	mounts from your
	Creditor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or □ No □ Yes		as any of your property in the possession of an a er official?	assignee for the bene	fit of creditors, a
Pa	tt 5: List Certain Gifts and Contribution	s			
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift.	uptcy, d	lid you give any gifts with a total value of more t	han \$600 per person?	?
	Gifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	□ No		lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or c Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
	Various charities and church		Approx \$100/mo total	Various	\$2,400.00
Ра	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers	i			
16.	consulted about seeking bankruptcy or I	reparin	d you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services required	, , ,	rty to anyone you
	□ No				
	Yes. Fill in the details. Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not Y	ou	transferred	or transfer was made	payment

Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Case 18-05033 Page 45 of 62
Case number (if known) Document

Debtor 1 Gayle M. Anderson

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	Kent A. Gaertner P.C. 300 S. County Farm Rd. Suite #I/J Wheaton, IL 60187 kgaertner@springerbrown.com	Check			January 2018	\$2,335.00
	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	s or to make payments			or transfer any prope	rty to anyone who
	■ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v	alue of any prope	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	usiness or financial affa de as security (such as	airs? the granting of a se		•	
	Person Who Received Transfer	Description and v	value of	Describe	any property or	Date transfer was
	Address	property transfer			received or debts	made
	Person's relationship to you	Cold C E house	ot 045 Hour	¢4 400 0	O was saller	2016
	Non Related Third Party Buyer	Sold S.F. house Dr. New Lenox 2016		proceeds costs an	0 was seller s after closing d mortgage	2016
	None			payoffs.		
	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		ny property to a se	elf-settled tru	ust or similar device	of which you are a
	Name of trust	Description and	value of the prope	rty transfor	od	Date Transfer was
	Name of trust	Description and V	value of the prope	ity transiem	eu	made
Par	List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Stor	age Units		
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc ■ No ■ Yes. Fill in the details.	r other financial accou	nts; certificates of			, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	te account was osed, sold, oved, or onsferred	Last balance before closing or transfer

Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Case 18-05033 Page 46 of 62 Case number (if known) Document

Debtor 1 Gayle M. Anderson

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, a	ny safe deposit box or other deposito	ry for securities,
	■ No □ Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	□ No■ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Elaine Hall 550 No. Kildeer #153 Bolingbrook, IL 60440	First Midwest Bank	Checking account for Debtor's mother. All funds belong to Mother and are used to pay her monthly nursing home expenses. Debtor has not deposited her own funds into account nor is authorized to use the funds excedpt for her mother's needs.	\$150.00
	Elaine Hall See above	Chase Bank	Checking account for Debtor's mother held with Debtor's sister. All funds belong to Mother and are used to pay her monthly nursing home expenses. Debtor has not deposited her own funds into account nor is authorized to use the funds excedpt for her mother's needs.	\$3,163.00

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Page 47 of 62
Case number (if known) Document

Debtor 1 Gayle M. Anderson

Part 10: Give Details About Environmental Information

For	the purpose of Part 10, the following definitions a	арріу:			
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, ground	• .	•	
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s		aw, whether you	now own, operate, o	r utilize it or used
	Hazardous material means anything an environmental hazardous material, pollutant, contaminant, or s		waste, hazardou	s substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wher	they occurred.		
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in viola	tion of an environme	ntal law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		tal law, if you	Date of notice
25.	Have you notified any governmental unit of any of the No ☐ Yes. Fill in the details.	release of hazardous material?			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		tal law, if you	Date of notice
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	ronmental law? lı	nclude settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the ca	se	Status of the case
Pai	t 11: Give Details About Your Business or Conr	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have ar	y of the following	g connections to any	business?
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity,	either full-time or	r part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)		

Business Name

Address (Number, Street, City, State and ZIP Code)

■ A partner in a partnership

☐ An officer, director, or managing executive of a corporation

No. None of the above applies. Go to Part 12.

☐ An owner of at least 5% of the voting or equity securities of a corporation

Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

Page 48 of 62 Document Debtor 1 ase number (if known) Gayle M. Anderson 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Gayle M. Anderson Signature of Debtor 2 Gayle M. Anderson Signature of Debtor 1 Date February 23, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 02/23/18 14:41:16

Case 18-05033

Doc 1

Filed 02/23/18

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Page 49 of 62 Document

Debtor 1	Gayle M. Anderso	on		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
(if known)				☐ Check if this is an amended filing

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Fifth Third Bank	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of 2016 Ford Focus HB 30000	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt: miles Location: 2900 Maple Av. #5C, Downers Grove IL 60515	☐ Retain the property and [explain]:	
Creditor's North Shore Bank	☐ Surrender the property.	■ No
name:	Retain the property and redeem it.	
Description of 2011 Jayco 330 RLTS	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property Location- Campsite at 7957 Log Cabin Rd. Putnam, II.	☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 50 of 62

Debtor 1 Gayle M. Anderson	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	property of my estate that secures a debt and any personal
	ature of Debtor 2
Signature of Debtor 1	
Date February 23, 2018 Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 55 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Gayle M. Anderson		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	BTOR(S)	
Ċ	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), ompensation paid to me within one year before the filing of erendered on behalf of the debtor(s) in contemplation of o	of the petition in bankruptcy	, or agreed to be paid	to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	2,000.00	
	Prior to the filing of this statement I have received			2,000.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed compens	sation with any other person	unless they are memb	pers and associates of 1	ny law firm.
[I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names				w firm. A
6. I	n return for the above-disclosed fee, I have agreed to rende	er legal service for all aspec	ts of the bankruptcy c	ase, including:	
b c	Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statemed Representation of the debtor at the meeting of creditors as [Other provisions as needed]	ent of affairs and plan which	h may be required;	-	iptcy;
7. B	y agreement with the debtor(s), the above-disclosed fee do	pes not include the following	g service:		
	(CERTIFICATION			
	certify that the foregoing is a complete statement of any agnkruptcy proceeding.	greement or arrangement fo	r payment to me for re	epresentation of the del	btor(s) in
Fe	bruary 23, 2018	/s/ Kent A. Gaert	ner		
\overline{Da}	te	Kent A. Gaertner			
		Signature of Attorn Kent A. Gaertner			
		300 S. County Fa			
		Suite I Wheaton, IL 6018	87		
		(630) 510-0000 I	Fax: (630) 510-0004		
		kgaertner@sprin	gerbrown.com		
		Name of law firm			

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 56 of 62

Document Page 56 of 62 United States Bankruptcy Court Northern District of Illinois

ln re	Gayle M. Anderson		Case N	o.	
		Debtor(s)	Chapte	r 7	
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR	DEBTOR(S)	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the five rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy,	or agreed to be p	aid to me, for service	that es rendered or to
	For legal services, I have agreed to accept	***************************************	\$	2,000.00	
	Prior to the filing of this statement I have received			2,000.00	
	Balance Due		\$	0.00	
2. \$	5 335.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. l	■ I have not agreed to share the above-disclosed co	mpensation with any other person	unless they are m	embers and associate	es of my law firm.
1	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the				ny law firm. A
6. 1	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankrupto	cy case, including:	
t c	 Analysis of the debtor's financial situation, and response of the debtor's financial situation, and response of the debtor at the meeting of creed. [Other provisions as needed] 	tatement of affairs and plan which	may be required	·	oankruptcy;
7. I	By agreement with the debtor(s), the above-disclosed	fee does not include the following	g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for	or representation of t	the debtor(s) in
	ebruary 21, 2018		6		
D	Pate 1	Kent/A. Gaertner Signature of Attorne			
		Kent A. Gaertner	P.C.		
		300 S. County Fa Suite I	rm Rd.		
		Wheaton, IL 6018			
		(630) 510-0000 F kgaertner@sprin			
		Name of law firm	2-1-1-1		

Kent A. Gaertner, P.C.

ADVANCE PAYMENT RETAINER AGREEMENT

The undersigned hyle Mhreason, hereinafter referred to as "Client", agrees to employ Kent A. Gaertner P.C., hereinafter referred to as "Attorney," to render legal services in connection with filing a Chapter 7 bankruptcy for Client, and hereby empowers and authorizes Attorney to do all things, in their sole discretion, reasonably necessary to bring the matter to a successful conclusion. Client acknowledges that the following advance payment retainer agreement has been fully explained, and Client agrees to pay said fees and costs in consideration of legal services rendered or to be rendered.

Client agrees to pay Attorney a fee of \$2 000 for the services set forth below. In addition, Client agrees to pay all costs, including the filing fee for the bankruptcy of \$335.00. All checks should be made payable to "Kent A. Gaertner P.C.".

RETAINER

This retainer agreement is an advance payment retainer agreement. The funds Client has agreed to pay Attorney shall be deposited in the Kent A. Gaertner P.C. operating Account and ownership of said funds shall pass to Kent A. Gaertner P.C. immediately upon payment. The special purpose for this advance payment retainer is to allow Client to retain Attorney to represent him against creditors without fear that his retainer may be subject to the claims of his creditors or a bankruptcy trustee. Client understands that it is advantageous to treat this retainer as an advance payment retainer in that it protects the funds paid to Attorney from the claims of his creditors.

Alternatively, as our client, it is your option to have your money placed into a security retainer. If this retainer were treated as a security retainer said funds would remain the property of Client be deposited into our Trust Account and therefore subject to the claims of the Client's creditors. The choice of the type of retainer to be used is yours alone. However, the Attorney may choose not to take on this representation if the client requires the retainer funds be placed in a security retainer account.

Client agrees that should Client decide not to file bankruptcy or not to continue using Attorney's services, Attorney may charge against any retainer paid the amount of \$350.00 per hour for all services rendered to date, plus actual costs incurred. The client specifically agrees that once the initial draft of the bankruptcy petition has been substantially completed, the entire retainer paid shall be deemed as fully earned by the Attorney regardless of whether the Client decides to file the bankruptcy case or not.

SCOPE OF REPRESENTATION

It is understood that the above referenced flat fee is payment for services rendered and services to be performed. The services include: review of financial status; review of various documents related to debts and obligations; specific advice regarding how to avoid bankruptcy and alternatives to bankruptcy; counseling as to various types of bankruptcy chapters; available exemptions; effect of reaffirmations of debts and completion of reaffirmation agreements presented by creditors if necessary, complete drafting of all required bankruptcy documents; revision and redraft of final bankruptcy documents; attending creditors' meeting, responding to requests for additional information by Trustee or creditors, enforcement of the Automatic Stay, and closing the file. The representation of the client shall terminate upon entry of an order of discharge or the closing of the case, whichever shall first occur.

Client acknowledges that additional attorney's fees will be required should further representation, outside the scope of services listed above, become necessary, including, but not limited to, any Bankruptcy Rule 2004 examinations. redemptions, avoiding liens, surrendering property, any adversary proceedings, objections to discharge dischargeability, objections to claims of exemption, Trustee audit, or any other action, hearing or representation that is not specified in the preceding paragraph of this agreement. Said additional representation shall be covered by a separate legal services agreement and will require an additional retainer.

CLIENT OBLIGATIONS

Client agrees to fully cooperate in the preparation of the bankruptcy case, to answer all questions truthfully and completely and to provide true and accurate information or documents, to appear for the creditors' meeting, depositions and court appearances and to comply with all reasonable requests made in preparation of this bankruptcy case. Failure to cooperate may result in Court-imposed sanctions and/or Attorney's withdrawal from the case.

Client understands that he shall receive copies of all documents related to his file. Client should retain those documents as his copy of his file. Should Client require additional copies of the Attorney's file, Client understands that he will be charged for those copies.

Client understands that his file shall be kept no more than five years. Should Client require copies of any documents or the return of original documents provided to Attorney he must request those copies in writing before the expiration of that five-year period.

Client understands that it is the Client's responsibility to provide Attorney with a complete and accurate list of creditors and other information requested on Attorney's Debt Listing Sheet and Questionnaire. The Client further understands that any debts not listed in his bankruptcy schedules may not be discharged. If Client fails to provide Attorney with all information necessary to prepare the necessary documents and said failure necessitates the amending of the schedules or Statement of Financial Affairs, Client agrees to pay an additional \$100.00, plus any applicable filing fee, to cover the fees and costs of said amendment.

ADDITIONAL PROVISIONS

The fees charged in connection with this bankruptcy and for bankruptcy issues only. They do not included resolution of any matters involving loan modifications, foreclosure defense and credit reporting or information.

It is agreed that upon the event of any default or breach of any kind under this agreement by Client, Attorney reserves the right to withdraw as counsel of record for Client. It is further agreed that Client shall not have any recourse or claim against Attorney for damages following the withdrawal of Attorney as Client's counsel. All representation of Client by Attorney shall be terminated by the discharge or closing of Client's bankruptcy case, whichever shall first occur.

In some cases it may be necessary to hire an attorney outside Attorney's firm. This attorney will be paid out of the retainer paid to Attorney. Client expressly consents to the hiring of an outside attorney to cover court dates as needed.

This constitutes the entire agreement between the Attorney and Clients regarding attorneys' fees and/or services provided in the engagement, the parties agree to resolve that dispute through mediation, followed by arbitration before any suit is filed.

Attorney is a debt relief agency and helps people file for relief under the Bankruptcy Code.

Special Financial Management Course Notice

Client MUST provide Attorney with a copy of Client's Certificate of Completion of Financial Management Course. If Client fails to ensure that Attorney has received and filed the required Certificate of Completion of Financial Management Course, the Client shall be responsible for payment of the case

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 60 of 62

reopening fee and additional Attorney's fees of \$500.00 for filing a motion to reopen the case and file said certificate. Attorney is under no obligation to file any motion to reopen Client's case until the above referenced fees and costs are paid.

Client Client Client

By Client's signature below, Client acknowledges understanding the terms of this agreement and agrees to abide by its provisions. Client has received a copy of this agreement for his records no later than five business days after the first date on which the Attorney provided any bankruptcy assistance services to client.

Dated: 1/20/18

Seyle M. Hy

Cli

Attorney

Case 18-05033 Doc 1 Filed 02/23/18 Entered 02/23/18 14:41:16 Desc Main Document Page 61 of 62

United States Bankruptcy Court Northern District of Illinois

In re	Gayle M. Anderson		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors:	9
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	February 23, 2018	/s/ Gayle M. Anderson Gayle M. Anderson Signature of Debtor		

Carson's 6550 N. Loop 1604 East Suite 101 San Antonio, TX 78247-5004

Chase P.O. Box 15298 Wilmington, DE 19850-5298

Discover P.O. Box 15316 Wilmington, DE 19850-5316

Discover P.O. Box 30396 Salt Lake City, UT 84130

Fifth Third Bank
P.O. Box 630778
Cincinnati, OH 45263-0778

Gwynie Bee 43-01 22nd St. 5th Floor Long Island City, NY 11101-5029

J.C. Penny/GE Capital Retail Bank P.O.Box 965009 Orlando, FL 32896-5009

Kohls P.O. Box 2983 Milwaukee, WI 53201

North Shore Bank 15700 Blue Mound Rd. Brookfield, WI 53005